UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK (In the space above enter the full name(s) of the plaintiff(s).) COMPLAINT -against-□ No Jury Trial: Yes (check one) (In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.) Parties in this complaint: I. List your name, address and telephone number. If you are presently in custody, include your A. identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary. Plaintiff Name Street Address County, City State & Zip Code Telephone Number List all defendants. You should state the full name of the defendant, even if that defendant is a В. government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary No on Defendant No. 1 Street Address

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		County, City State & Zip Code Telephone Number		
Defendar	nt No. 2	Name Street Address County, City State & Zip Code Telephone Number		
Defenda	nt No. 3	Name Street Address County, City State & Zip Code Telephone Number		
Defenda	ent No. 4	Name Street Address County, City State & Zip Code Telephone Number		
U.S.C.	volving a fed § 1331, a ca n case Unde	risdiction: ourts of limited jurisdiction. Only two types of cases can be heard in federal court: eral question and cases involving diversity of citizenship of the parties. Under 28 se involving the United States Constitution or federal laws or treaties is a federal r 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another in damages is more than \$75,000 is a diversity of citizenship case.		
A.	What is the basis for federal court jurisdiction? (check all that apply)			
В.	If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue?			
C.	Plaintiff(s) st	r jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party? ate(s) of citizenship state(s) of citizenship		

III. Statement of Claim:

State as briefly as possible the <u>facts</u> of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

9	You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary,					
	number and set forth each claim in a separate paragraph.					
	A. Where did the events giving rise to your claim(s) occur? B. What date and approximate time did the events giving rise to your claim(s) occur?					
	N) IA					
	C. Facts:					
What happened to you?						
Who did what?						
	1					
Was anyone else . Involved?						
Who else saw what happened?						
	IV. Injuries: If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.					
	treatment, if any, you required and received.					

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V. Relief:		
State what you want the Cou	art to do for you and the amo	ount of monetary compensation, if any, you are
	ch compensation.	
Want the	Court	o make he
the Dies	Tentof fl	e MSA
		N _e
(#1222-111-212-2-2-2-2-2-2-2-2-2-2-2-2-2-		
I declare under nenalty o	f perjury that the foregoing	g is true and correct.
Signed this day of	Signature of Plaintiff Mailing Address	127 West25th Street
	Telephone Number	518 615-3112 AT1831
	Fax Number (if you he	ave one)
Note: All plaintiffs name must also provide	ed in the caption of the comp their inmate numbers, prese	plaint must date and sign the complaint. Prisoners nt place of confinement, and address.
For Prisoners:		
	7	OO Tour delivering
I declare under penalty of this complaint to prison au the Southern District of N	thorities to be mailed to the	ay of, 20, I am delivering Pro Se Office of the United States District Court for
		0/10 2
	Signature of Plaintiff:	A CONTRACTOR OF THE PROPERTY O
	Inmate Number	0445446